

**LTB**

KANSAS SECRETARY OF STATE  
**Series Limited Liability Company Application  
for Admission to Transact Business**  
Instructions

**Kansas Office of the Secretary of State:**

Memorial Hall, 1st Floor (785) 296-4564  
120 S.W. 10th Avenue kssos@sos.ks.gov  
Topeka, KS 66612-1594 www.sos.ks.gov

The following form **must be complete** and accompanied by **the correct filing fee** or the document will **not** be accepted for filing.

Save time and money by filing your forms online at **www.sos.ks.gov**. There, you can also stay up-to-date on your organization's status, annual report due date, and contact addresses.

<input type="checkbox"/> <b>Filing fee</b>	The filing fee for this form is <b>\$250</b> . For more information, please call (785) 296-4564.
<input type="checkbox"/> <b>Payment</b>	Please enclose a check or money order payable to the Secretary of State. Forms received without the appropriate fee will not be accepted for filing. Please do not send cash. <b>NOTICE:</b> There is a \$25 service fee for all checks returned by your financial institution. Also, to expedite processing, please do not use staples on your documents or to attach checks.
<input type="checkbox"/> <b>Address of registered agent</b>	This address is required to be maintained in the jurisdiction of its organization or, if not required, of the principal place of business. A P.O. box or c/o is unacceptable. The registered office must be located in Kansas.
<input type="checkbox"/> <b>Additional information</b>	If additional space is needed, please provide an attachment.

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THIS SPACE FOR OFFICE USE ONLY.

1. **Company name**

2. **Jurisdiction of organization**

3. **Date of organization**

Month

Year

4. **Effective date**

Month

Year

5. **Mailing address**

Address

City

State

Zip

Country

6. **Registered agent  
name and address**

Must be a street, rural route,  
or highway. A P.O. box is  
unacceptable.

Name

Street Address

City

State

Zip

Country

7. **Date on which company first conducted business in Kansas (if applicable)**

Month

Year

8. **List the purpose(s) for which the company is organized and proposes to conduct business in Kansas:**

9. **The jurisdiction of organization and its operating agreement permits the establishment of a series having separate rights, powers, or duties and has limited the liabilities of such series. Unless otherwise provided for in the operating agreement, the debts, liabilities, and obligations incurred, contracted for, or otherwise existing with respect to a particular series of the limited liability company are enforceable against the assets of such series only, and not against the assets of the limited liability company generally or any other series thereof: and none of the debts, liabilities, obligations, and expenses incurred, contracted for, or otherwise existing with respect to the limited liability company generally or any other series thereof shall be enforceable against the assets of such a series.**

10. **A Certificate of Designation shall be filed for each series being registered to do business in this state.**

**11. This limited liability company...**

☐ ... is managed by the manager(s). ☐ ... has management vested in the member(s).

**11a. Name(s) and address(es)**

If additional space is needed, please provide attachment.

Name	Address		
City	State	Zip	Country
Name	Address		
City	State	Zip	Country
Name	Address		
City	State	Zip	Country

12. The limited liability company hereby consents, without power of revocation, that actions may be commenced against it in the proper court of any county in the state of Kansas where there is proper venue by service of process on the Secretary of State of the State of Kansas; and the limited liability company stipulates and agrees that such service shall be taken and held in all courts to be valid and binding as if due service had been made upon the members of the foreign limited liability company.

14. This application is accompanied by a Certificate of Good Standing or Existence, duly authenticated within the last 60 days by the officer of the state or county wherein the LLC is formed. If the Certificate of Good Standing or Existence does not affirm the ability to establish series, this application also is accompanied by a duly authenticated copy of the Articles of Organization as amended.

15. I declare under penalty of perjury pursuant to the laws of the state of Kansas that the foregoing is true and correct and that I have remitted the required fee.

Signature of Manager or Member

X

Month      Day      Year

Name of Signer (printed or typed)

☐ Manager ☐ Member

If applicant is signing for a company or other entity, state name of company and indicate whether it is a member or manager of the LLC